

# PURCHASE ORDER

Please deliver to this office within 45 Calendar days from receipt hereof the following

**Terms & Conditions:**

- Very truly yours,

ELY E. ROXAS

Administrative Officer III

Estimated Budget Available: <u>                    </u> Funds Available in the amount of: <u>Php250,000.00</u>		APPROVED: <u>                    </u>
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <u>EDITHA O. RAMASTA</u>            Fiscal Controller IV         </div> <div style="width: 45%;"> <u>LYNIE S. ARCENAS</u>            Fiscal Controller III         </div> </div>		<u>JOSEPH O. VERGARA</u> Head, SBAC HEAD OF THE AGENCY or Authorized Representative
Within the COB: <u>                    </u> Expense Code: <u>                    </u> Budget: <u>                    </u> Remarks: <u>                    </u>		
CONFORME: <u>                    </u> <u>MADLEN / OCOM / ACC OUT MANGER</u> Signature over Printed Name and Position of authorized representative		Received copy of P.O.: <u>                    </u> <u>12/27/18</u> Date